## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

BRAVE KOCH-FICE

|   |  | SMALL ENTITY                              |  |                                   | OTHER THAN   |                  |          |                    |                        |            |                     |                        |
|---|--|---|--|-----------------------------------|--------------|------------------|----------|--------------------|------------------------|------------|---------------------|------------------------|
| TOTAL CLAIMS  |  |   | (Column 1)                             |                                   | (Column 2)   |                  | _        | TYPE               |                        | OR<br>1    | SMALL               |                        |
| TOTAL OLAIWIS   |  |   | 27                                     |                                   |              |                  | L        | RATE               | FEE                    |            | RATE                | FEE                    |
| FOR   |  |   | NUMBER FILED                           |                                   | NUMBER EXTRA |                  | В        | ASIC FEE           | 375.00                 | OR         | BASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 9 minus 20=                            |                                   | * 7          |                  |          | X\$ 9=             |                        | OR         | X\$18=              | 63                     |
| INDEPENDENT CLAIMS  |  |   | ــــــــــــــــــــــــــــــــــــــ | nus 3 =                           | * 2          |                  |          | X42=               |                        | OR         | X84=                | 8 %                    |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |  |                                   |              |                  |          | +140=              |                        | OR         | +280=               |                        |
| * If the difference in column 1 is less than zero, enter "0   |  |   |  |                                   | "0" in c     | olumn 2          | <u>_</u> | TOTAL              |                        | OR         | TOTAL               | 522                    |
| CLAIMS AS AMENDED - PART II   |  |   |  |                                   |              |                  |          | Į.                 |                        | •          | OTHER               |                        |
|   | negarista e di Santa Tana                      | (Column 1)                                |  | (Colun                            |              | (Column 3)       |          | SMALL E            |                        | OR         | SMALL               |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHI<br>NUME<br>PREVIC<br>PAID I | BER<br>OUSLY | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |
| NON   | Total  | *   | Minus                                  | **                                |              | =                |          | X\$ 9=             |                        | OR         | X\$18=              |                        |
| AME   | Independent                                    | *   | Minus                                  | ***                               | CLAINA       |                  |          | X42=               |                        | OR         | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                                   |              |                  |          | +140=              |                        | OR         | +280=               |                        |
|   |  |   |  |                                   |              |                  | <u>L</u> | TOTAL              |                        | י בו       | TOTAL               |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |  |                                   |              |                  |          | DDIT. FEE          |                        | 10,,       | ADDIT. FEE          |                        |
|   |  | (Column 1)<br>CLAIMS                      |  | HIGH                              | EST          | (Column 3)       | _        |                    | ADDI-                  | ļ <b>I</b> |                     | ADDI-                  |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |  | NUMI<br>PREVIO<br>PAID            | DUSLY        | PRESENT<br>EXTRA |          | RATE               | TIONAL<br>FEE          |            | RATE                | TIONAL<br>FEE          |
|   | Total  | *   | Minus                                  | **                                |              | =                | Γ        | X\$ 9=             |                        | OR         | X\$18=              |                        |
|   | Independent                                    | *   | Minus                                  | ***                               |              | =                | 一        | X42=               |                        | OR         | X84=                |                        |
|   | FIRST PRESE                                    | NTATION OF MI                             | JLTIPLE DEF                            | TPLE DEPENDENT CLAIM              |              |                  | -        |                    |                        | Un         |                     | <u> </u>               |
|   |  |   |  |                                   |              |                  | L        | +140=              |                        | OR         | +280=               |                        |
|   |  |   |  |                                   |              |                  |          | TOTAL<br>DDIT. FEE |                        | OR         | TOTAL<br>ADDIT. FEE |                        |
|   |  | (Column 1)                                |  | (Colun                            |              | (Column 3)       |          |                    |                        |            |                     |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGH<br>NUMI<br>PREVIO<br>PAID    | BER<br>DUSLY | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |
| NON   | Total  | *   | Minus                                  | **                                |              | =                | Γ        | X\$ 9=             |                        | OR         | X\$18=              |                        |
| ME  | Independent                                    | *   | Minus                                  | ***                               |              | ]=               | <b> </b> | X42=               |                        |            | X84=                |                        |
| Ľ   | FIRST PRESE                                    | NTATION OF MI                             | PENDENT                                | CLAIM                             |              | -                |          |                    | OR                     |            | <del> </del>        |                        |
| <b>±</b> 1  | if the entry in activ                          | mn 1 in loss that the                     | no ontario col-                        | .ma 0                             | . "O" i      | luma 2           | Ŀ        | +140=              |                        | OR         | +280=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE |  |   |  |                                   |              |                  |          |                    |                        |            |                     |                        |
|   |  | nber Previously Pa                        |  |                                   |              |                  | found    | d in the app       | ropriate box           | k in col   | lumn 1.             |                        |